

**CERTIFICATION OF WORK
SERVICE CALL**

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: NY126 Chili

Date of Visit: 8/28/25

Contractor Personnel on Site:

1. DAN FLYNN
2. _____
3. _____

4. _____
5. _____
6. _____



Service Call Number

FEMS# 3190278

WO# 19803

Description of Repairs

Replace I/O module

Installed new CC2 expansion module. Set address. Control program is operating properly. Chiller is running properly.

Note: Chiller enabled/disabled often. Hadd Charlie remote in to control system and he recommends a site visit to make programming changes.

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: DAN FLYNN

Date: 8/28/25

Signed: _____

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: John F Granata AFOS

Date: 09/04/2025

Signed: John F. Granata

E-Mail: john.f.granata.ctr@army.mil

JOB NAME: ARMY CHILI
ADDRESS: JETVIEW DR
CHILI, NY
DATE: AUG 28TH, 2025
JOB #: 2049
CUST. PO#:
CALL TYPE: T&M ☐ QUOTE ☒ PM ☐



Phone: 716.695.3600 ∞ Fax: 716.695.3700

DESCRIPTION OF WORK: Installed new CC2 expansion module. Set address. Control program is operating properly. Chiller is running properly.

NOTE: Chiller enabled/disabled often. Had Charlie remote in to control system and he recommends a site visit to make programming changes.

CODES: TRUCK STOCK (T) SHOP STOCK (S) CUSTOMER (C)

☐ COMPLETE
☐ INCOMPLETE

TOTAL

CUSTOMER SIGNATURE

*Service charge covers expense of truck, tools, and sundries.